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SCHIFF HARDIN LLP

PATENT DEPARTMENT

6600 SEARS TOWER

233 SOUTH WACKER DRIVE

CHICAGO, ILLINOIS 60606

CONFIRMATION NO.: 9473

GROUP ART UNIT: 2828

EXAMINER: Delma R. Ruiz

re application of: Heinrich Jürgensen

Serial No.: 09/445,112

Filed: February 17, 2000

For: **"METHOD AND ARRANGEMENT FOR REDUCING THE PUMP LIGHT AT THE EXIT OF A FIBER LASER"**

AMENDMENT "E" MAIL STOP NON-FEE AMENDMENT

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

SIR:

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below.

| CLAIMS AS AMENDED | | | | | | |
|---|--|-------|--|-------------------------|---|--------------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | (6) RATE | (7) ADDITIONAL FEE |
| TOTAL CLAIMS | *12 | MINUS | **20 | X | () X 9.00 () X 18.00 | |
| INDEP. CLAIMS | *2 | MINUS | **3 | X | () X 42.00 () X 84.00 | \$ |
| Application amended to contain any multiple dependent claims not previously paid for. | | | | () YES () NO | () \$140.00 () \$280.00 ONE TIME | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | | |

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.

☐ Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated for ___ months so that the period for response is extended to _____. A check in the amount of \$_____ is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$_____ is attached.

☐ A check for \$_____ accompanying IDS under 37 CFR 1.97(c) is attached

☐ A check for \$_____ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed.

When phoning re this application, please call (312) 258-5500.

SCHIFF HARDIN LLP (Customer Number: 26574)

Patent Department

BY Brett A. Valiquet (Reg. #27,841)

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA. 22313-1450 on May 3, 2004.

Brett A. Valiquet

NAME OF APPLICANT'S ATTORNEY

SIGNATURE

May 3, 2004

DATE